

MISSOURI DIVISION OF HEALTH - STANDARD CERTIFICATE OF DEATH

DEPARTMENT OF PUBLIC HEALTH AND WELFARE

-62-037313

STATE FILE NUMBER

DO NOT WRITE
ON THIS STUB

AMENDED

Registration District

FILED OCT 15 1962

Primary Registration District No.

3072

Registrar's No.

200

FILED OCT 15 1962

1. PLACE OF DEATH

a. COUNTY

Saline

b. CITY (If outside corporate limits, give TOWNSHIP only)
OR
TOWN

Marshall

Length of stay in 1b

I month

2. USUAL RESIDENCE (Where deceased lived. If institution: Residence before admission)

a. STATE

Missouri

b. COUNTY

Saline

Inside Limits

Yes ☒ No ☐c. CITY
OR
TOWN

Arrow Rock Twp.

c. FULL NAME OF (If NOT in hospital, give location)
HOSPITAL OR
INSTITUTION

Fitzgibbon Hospital

Inside Limits

Yes ☒ No ☐d. STREET
ADDRESS

(If outside, give location)

Napton, Mo. Route No. I

Reside on Farm

Yes ☒ No ☐3. NAME OF DECEASED
(Type or print)

First

Ara

Middle

Belle

Last

VanArsdale

4. DATE
OF
DEATH

Month

Day

Year

October

9th

1962

5. SEX

Female

6. COLOR OR RACE

White

7. Married ☐ Never Married ☐Widowed ☒ Divorced ☐

8. DATE OF BIRTH

II-2I-1878

9. AGE (last birthday)

83

IF UNDER 1 YEAR

Months

Days

IF UNDER 24 HR

Hours

Min.

10a. USUAL OCCUPATION (Give kind of work done
during most of working life, even if retired)

House wife

10b. KIND OF BUSINESS OR INDUSTRY

Own home

11. BIRTHPLACE (City and state or country)

Saline County Mo.

12. CITIZEN OF WHAT COUNTRY

USA

13a. FATHER'S NAME

J.M.Odell

13b. MOTHER'S MAIDEN NAME

Olive Belle Jester

14. NAME OF HUSBAND OR WIFE

William O. VanArsdale

15. WAS DECEASED EVER IN U.S. ARMED FORCES?

(Yes, no, or unknown) (If yes, give war or dates of service)

No

16. SOCIAL SECURITY NO.

17. INFORMANT

Address

Ray VanArsdale, Napton, Mo. R. No. I

18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c).)

PART I. DEATH WAS CAUSED BY:

IMMEDIATE CAUSE (a)

Conditions, if any,
which gave rise to
above cause (a),
stating the under-
lying cause last.

DUE TO (b)

DUE TO (c)

PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not related to the terminal
disease condition given in PART I (a)PART III. If deceased was female was
there a pregnancy in last 90 days.☐ Yes☐ No☐ Unknown19. WAS AUTOPSY
PERFORMED?
YES ☐ NO ☐

20a. ACCIDENT

☐

SUICIDE

☐

HOMICIDE

☐

20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in PART I or PART II of item 18.)

20c. TIME OF
INJURY

Hour

Month, Day, Year

a.m.
p.m.

20d. INJURY OCCURRED

WHILE AT WORK ☐NOT WHILE AT WORK ☐20e. PLACE OF INJURY (e.g., in or about home,
farm, factory, street, office bldg., etc.)

20f. CITY, TOWN, OR LOCATION

COUNTY

STATE

21. I attended the deceased from 9-15-62 to 10-9-62 and last saw her alive on 10-8-62

Death occurred at 12-15 A.M. m on the date stated above, and to the best of my knowledge, from the causes stated.

22a. SIGNATURE

(Deceased or title)

22b. ADDRESS

22c. DATE SIGNED

23a. BURIAL, CREMATION,
REMOVAL (Specify)

Burial

23b. DATE

10-10-1962

23c. NAME OF CEMETERY OR CREMATORY

Ridge Park cemetery

23d. LOCATION (City, town, or county)

Marshall Missouri

(State)

24. FUNERAL DIRECTOR

ADDRESS

Campbell-Lewis, Marshall, Mo.

25. DATE RECD. BY LOCAL REG.

Oct-10-62

26. REGISTRAR'S SIGNATURE

Cecil G. Read

(Licensed Embalmer's Statement on Reverse Side)

USE BLACK INK
OR
TYPEWRITER RIBBON

AMENDMENTS ON THIS RECORD ARE AS FOLLOWS

INSTEAD OF

SHOULD READ

ITEM NO.

DATE AMENDED

DOCUMENT

BY AFFIDAVIT OF

MEDICAL CERTIFICATION

OCT 25 1962

STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me,
or by _____, Student Embalmer No. _____
working under my personal supervision.

Student _____
Signature of Student Embalmer

Signed James H. Lewis

Licensed Embalmer No. 4709

P. O. Address Marshall, Mo.

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license).

If embalmed by a STUDENT, he also shall sign in his OWN handwriting.

If this body is not embalmed, fact should be so stated above.